

NURSING BOARD[655]

Adopted and Filed

Pursuant to the authority of Iowa Code sections 17A.3 and 147.76, the Board of Nursing hereby amends Chapter 6, “Nursing Practice for Registered Nurses/Licensed Practical Nurses,” Iowa Administrative Code.

These amendments update and revise the current limited and expanded intravenous therapy scope of practice for the licensed practical nurse (LPN).

Notice of Intended Action for these amendments was published in the Iowa Administrative Bulletin on July 14, 2010, as **ARC 8930B**. The Board held a formal public hearing on September 15, 2010, to receive comments on the proposed amendments. In addition, an informal public hearing was held over the Iowa Communications Network (ICN) on September 13, 2010. Comments were received from long-term care associations, licensed hospitals, registered nurses, licensed practical nurses and the Iowa Nurses Association. These comments included expanding the LPN’s scope of practice, supervision of the LPN by the RN and the need to meet the current standard of care. There were comments in agreement and in opposition.

These amendments have been revised since publication of the Notice of Intended Action. In paragraphs 6.3(4)“e,” 6.5(4)“c,” and 6.5(7)“e,” the words “licensed skilled” have been deleted from the phrase “licensed skilled nursing facility” to bring the phrase into agreement with the following definition of “nursing facility” in Chapter 6: “‘Nursing facility’ means an institution as defined in Iowa Code chapter 135C. This definition does not include acute care settings.”

These amendments will become effective February 16, 2011.

These amendments are intended to implement Iowa Code chapter 152.

The following amendments are adopted.

ITEM 1. Adopt the following new definitions in rule **655—6.1(152)**:

“Expanded intravenous therapy certification course” means the Iowa board of nursing course required for licensed practical nurses to perform procedures related to the expanded scope of practice of intravenous therapy.

“Midline catheter” means a long peripheral catheter in which the distal end resides in the mid to upper arm, but the tip terminates no further than the axilla.

“Peripheral intravenous catheter” means a catheter three inches or less in length.

“Peripherally inserted central catheter” means a soft flexible central venous catheter inserted into an extremity and advanced until the tip is positioned in the vena cava.

ITEM 2. Adopt the following new implementation sentence in rule **655—6.1(152)**:

This rule is intended to implement Iowa Code chapter 152.

ITEM 3. Rescind subrule 6.3(4) and adopt the following new subrule in lieu thereof:

6.3(4) A licensed practical nurse, under the supervision of a registered nurse, may engage in the limited scope of practice of intravenous therapy. The licensed practical nurse shall be educated and have documentation of competency in the limited scope of practice of intravenous therapy. Limited scope of practice of intravenous therapy may include:

a. Addition of intravenous solutions without adding medications to established peripheral intravenous sites.

b. Regulation of the rate of nonmedicated intravenous solutions to established peripheral intravenous sites.

c. Administration of maintenance doses of analgesics via the patient-controlled analgesia pump set at a lock-out interval to established peripheral intravenous sites.

d. Discontinuation of peripheral intravenous therapy.

e. Administration of a prefilled heparin or saline syringe flush, prepackaged by the manufacturer or premixed and labeled by a registered pharmacist or registered nurse, to an established peripheral lock, in a licensed hospital, a nursing facility or a certified end-stage renal dialysis unit.

ITEM 4. Renumber subrules **6.3(5)** to **6.3(9)** as **6.3(6)** to **6.3(10)**.

ITEM 5. Adopt the following new subrule 6.3(5):

6.3(5) When nursing tasks are delegated by the registered nurse to the licensed practical nurse in a certified end-stage renal dialysis unit, the facility must have a written policy that defines the practice and written verification of the education and competency of the licensed practical nurse in accordance with the facility's written policy. Nursing tasks which may be delegated to the licensed practical nurse for the sole purpose of hemodialysis treatment include:

a. Initiation and discontinuation of the hemodialysis treatment utilizing any of the following established vascular accesses: central line catheter, arteriovenous fistula, graft.

b. Administration, during hemodialysis treatment, of local anesthetic prior to cannulation of the vascular access site.

c. Administration of prescribed dosages of heparin solution or saline solution utilized in the initiation and discontinuation of hemodialysis.

d. Administration, during hemodialysis treatment via the extracorporeal circuit, of the routine intravenous medications erythropoietin, Vitamin D Analog, intravenous antibiotic solutions prepackaged by the manufacturer or premixed and labeled by a registered pharmacist or registered nurse, and iron, excluding any iron preparation that requires a test dose. The registered nurse shall administer the first dose of erythropoietin, Vitamin D Analog, antibiotics, and iron.

ITEM 6. Adopt the following new implementation sentence in rule **655—6.3(152)**:

This rule is intended to implement Iowa Code chapters 152 and 152E.

ITEM 7. Rescind subrules **6.5(3)** to **6.5(5)**.

ITEM 8. Adopt the following new subrules 6.5(3) to 6.5(7):

6.5(3) A licensed practical nurse shall be permitted to perform, in addition to the functions set forth in subrule 6.3(4), procedures related to the expanded scope of practice of intravenous therapy upon completion of the board-approved expanded intravenous therapy certification course.

6.5(4) To be eligible to enroll in the course, the licensed practical nurse shall:

a. Hold a current unrestricted Iowa license or an unrestricted license in another state recognized for licensure in this state pursuant to the nurse licensure compact contained in Iowa Code chapter 152E.

b. Have documentation of 1040 hours of practice as a licensed practical nurse.

c. Be practicing in a licensed hospital, a nursing facility or a certified end-stage renal dialysis unit whose policies allow the licensed practical nurse to perform procedures related to the expanded scope of practice of intravenous therapy.

6.5(5) The course must be offered by an approved Iowa board of nursing provider of nursing continuing education. Documentation of course completion shall be maintained by the licensed practical nurse and employer.

6.5(6) The board-approved course shall incorporate the responsibilities of the licensed practical nurse when providing intravenous therapy via a peripheral intravenous catheter, a midline catheter and a peripherally inserted central catheter (PICC) to children, adults and elderly adults. When providing intravenous therapy, the LPN shall be under the supervision of a registered nurse. Procedures which may be performed if delegated by the registered nurse are as follows:

a. Initiation of a peripheral intravenous catheter for continuous or intermittent therapy using a catheter not to exceed three inches in length.

b. Administration, via a peripheral intravenous catheter, midline catheter, and a PICC line, of premixed electrolyte solutions or premixed vitamin solutions. The first dose shall be administered by the registered nurse. The solutions must be prepackaged by the manufacturer or premixed and labeled by a registered pharmacist or registered nurse.

c. Administration, via a peripheral intravenous catheter, midline catheter, and a PICC line, of solutions containing potassium chloride that do not exceed 40 meq per liter and that do not exceed a dose of 10 meq per hour. The first dose shall be administered by the registered nurse. The solutions must be prepackaged by the manufacturer or premixed and labeled by a registered pharmacist or registered nurse.

d. Administration, via a peripheral intravenous catheter, midline catheter, and a PICC line, of intravenous antibiotic solutions prepackaged by the manufacturer or premixed and labeled by a registered pharmacist or registered nurse. The first dose shall be administered by the registered nurse.

e. Maintenance of the patency of a peripheral intravenous catheter, midline catheter, and a PICC line with a prefilled heparin or saline syringe flush, prepackaged by the manufacturer or premixed by a registered pharmacist or registered nurse.

f. Changing the dressing of a midline catheter and a PICC line per sterile technique.

6.5(7) Procedures which shall not be delegated by the registered nurse to the licensed practical nurse are as follows:

a. Initiation and discontinuation of a midline catheter or a peripherally inserted central catheter (PICC).

b. Administration of medication by bolus or IV push except maintenance doses of analgesics via a patient-controlled analgesia pump set at a lock-out interval.

c. Administration of blood and blood products, vasodilators, vasopressors, oxytocics, chemotherapy, colloid therapy, total parenteral nutrition, anticoagulants, antiarrhythmics, thrombolytics, and solutions with a total osmolarity of 600 or greater.

d. Provision of intravenous therapy to a client under the age of 12 or any client weighing less than 80 pounds, with the exception of those activities authorized in the limited scope of practice found in subrule 6.3(4).

e. Provision of intravenous therapy in any other setting except a licensed hospital, a nursing facility and a certified end-stage renal dialysis unit, with the exception of those activities authorized in the limited scope of practice found in subrule 6.3(4).

ITEM 9. Amend rule **655—6.5(152)**, implementation sentence, as follows:

This rule is intended to implement Iowa Code chapters 136C and 152, ~~and 2000 Iowa Acts, House File 2105.~~

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EDITOR'S NOTE: For replacement pages for IAC, see IAC Supplement 1/12/11.